



# Check Request Form

BHS Date Check Request was turned in to the Athletic Office  
 BHS Athletic Office:  
 Office  
 Use \_\_\_\_\_  
 Only \_\_\_\_\_

All check requests are to be submitted to the BHS Athletic Office

Original receipts and/or invoices must be stapled to this form and detailed below

**Person requesting the check:**

Name: \_\_\_\_\_

Who is this payable to? \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Committee or Team: \_\_\_\_\_

Choose one:

Pick up check at the BHS Athletic Office?

Pick up check at the next Board Meeting?

Mail the check to the address above?

Items Purchased/Expenses	Quantity	Total (less sales tax)
<b>Total Due:</b>		

Treasurer Use Only:			
Total Team/Committee Event Budget:		Budget used including this payment:	
Budget Used to Date:		Budget Amount Remaining:	
Check #:		Account Posted To:	
Treasurer Signature:			